...mission unless it displays a valid OMB control number.

Application or Docket Number: 10 | 7,30,440

CLAIMS AS FILED – PART I

RCE 3/20/06

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
			RATE	FEE		RATE	FE
BASIC FEE (37 CFR 1.16(a))				$	OR		$
TOTAL CLAIMS (37 CFR 1.16(c))	31 minus 20 =		x $ 25 =		OR	x $ 50 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	4 minus 3 =		x $ 100 =		OR	x $ 200 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ $ 180 =		OR	+ $ 360 =	
			TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

1/6/07

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
					RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	31	Minus	31	= 0	x $ 25 =		OR	x $ 50 =	
Independent (37 CFR 1.16(b))	4	Minus	4	= 0	x $ 100 =		OR	x $ 200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $ 180 =		OR	+ $ 360 =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=	x $ 25 =		OR	x $ 50 =	
Independent (37 CFR 1.16(b))		Minus		=	x $ 100 =		OR	x $ 200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $ 180 =		OR	+ $ 360 =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=	x $ 25 =		OR	x $ 50 =	
Independent (37 CFR 1.16(b))		Minus		=	x $ 100 =		OR	x $ 200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $ 180 =		OR	+ $ 360 =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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